THE MINISTER OF AGRICULTURE (SHRI SHARAD PAWAR): (a) No, Sir.

(b) Does not arise. Out of Central share of Rs. 152.49 lakh, a sum of Rs. 100 lakh was released as first instalment during September 2004 to the State Government of Madhya Pradesh for development of fisheries in the six reservoirs by the Narmada Valley Development Department (NVDD). However, the balance amount of Rs. 52.49 lakh could not be released due to non-receipt of the progress report and utilization certificate from the State Government of Madhya Pradesh, which is mandatory.

Indian Public Health Standards

*348. SHRI K. RAMA MOHANA RAO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact the firstever draft of the Indian Public Health Standards, to have uniform guidlines to provide quality healthcaref in the country, has been released by his Ministry recently;

(b) whether it is a part and parcel of the National Rural Health Mission inaugurated by the Prime Minister recently; and

(c) the minimum functional grade prescribed for community health centres?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): (a) to (c) Yes, Sir, A key strategy of the National Rural Health Mission (NRHM) for strengthening Community Health Centres (CHCs) for First Referral Care is codification of new Indian Public Health Standards which sepcify the list of assured services and set up the norms for infrastructure, staff, equipment, drugs, management etc. for CHCs. In order to provide quality care in the CHCs, the standard have been prescribed to provide optimal expert care to the community and achieve and maintain an acceptable standard of quality of care. The standard would help monitor and improve the functioning of the CHCs. The components being strengthened under IPHs are:

- Two specialists *viz.* Anaesthetist and Public Health Programme Manager are to be provided on contractual basis in addition to available specialists *viz.* Surgery, Medicine, Obstetrics and Gynaecology and Paediatrics. The support manpower includes a Public Health Nurse and Auxiliary Nurse Mid-wife (ANMs) in addition to the existing staff.
- Physical infrastructure is to be remodelled or rearranged to make the best possible use for optimal utilization.
- Drug list for CHCs has been updated alongwith support for strengthening services like laboratory, blood storage etc.
- Capacity building is to be ensured at all levels by periodic training of all cadres.
- It is mandatory for every CHC to have Rogi Kalyan Samiti (RKS)/ Hospital Management Committee with representation from Panchayati Raj Institutions (PRI) to ensure better management of the Community Health Centres and accountability.
- Every CHC shall have the Charter of Patients' Rights displayed prominently at the entrance.
- A grievance mechanism under the overall supervision of RKSs is a part of IPHS.
- Every CHC shall have the Standard Operating Procedures and Standard Treatment Protocols for common ailments and National Health Programmes.
- Social audit by involvement of the community through RKSs/ Panchayati Raj Institutions (PRI) is recommended.
- External monitoring through Panchayati Raj Institutions (PRIs) and internal monitoring at appropriate intervals is advocated.

Mangrove forests

349. SHRI S.M. LALJAN BASHA: Will the Minister of ENVIRONMENT AND FORESTS be pleased to state:

(a) the area of mangrove forests in the country in acres, State-wise;